

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

|   |  |  |  |                                     |  |  |  |   |  |                             |  |                                    |  |
|---|--|--|--|-------------------------------------|--|--|--|---|--|-----------------------------|--|------------------------------------|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator's US EPA ID No.<br>CAD004967550 |  | Manifest Document No.<br>0000       |  | 2. Page 1 of 1                                   |  | Information in the shaded areas is not required by Federal law. |  |                             |  |                                    |  |
| 3. Generator's Name and Mailing Address<br>SHILEY INC. 17600 Gillette Ave. Irvine, CA. 92714  |  |  |  |                                     |  | A. State Manifest Document Number<br>84446918    |  |   |  |                             |  |                                    |  |
| 4. Generator's Phone (714) 250-8385   |  |  |  |                                     |  | B. State Generator's ID                          |  |   |  |                             |  |                                    |  |
| 5. Transporter 1 Company Name<br>OMEGA CHEMICAL CORP.   |  |  |  | 6. US EPA ID Number<br>CAD042245001 |  | C. State Transporter's ID<br>701737              |  |   |  |                             |  |                                    |  |
| 7. Transporter 2 Company Name   |  |  |  | 8. US EPA ID Number                 |  | D. Transporter's Phone (213) 698-0991            |  |   |  |                             |  |                                    |  |
| 9. Designated Facility Name and Site Address<br>OMEGA CHEMICAL CORP.<br>12504 Whittier Blvd.<br>Whittier, CA. 90602   |  |  |  |                                     |  | E. State Transporter's ID                        |  |   |  |                             |  |                                    |  |
|   |  |  |  |                                     |  | F. Transporter's Phone                           |  |   |  |                             |  |                                    |  |
|   |  |  |  |                                     |  | G. State Facility's ID                           |  |   |  |                             |  |                                    |  |
|   |  |  |  |                                     |  | H. Facility's Phone<br>(213) 698-0991            |  |   |  |                             |  |                                    |  |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)  |  |  |  |                                     |  | 12. Containers<br>No. Type                       |  | 13. Total Quantity  |  | 14. Unit<br>Wt/Vol          |  | 15. Waste No.                      |  |
| a. 10 5gal cans Dow Corning Medical<br>Ante from A Compound   |  |  |  |                                     |  | 010 Dm   |  | 00050 G   |  |                             |  | 212                                |  |
| b.  |  |  |  |                                     |  |  |  |   |  |                             |  |                                    |  |
| c.  |  |  |  |                                     |  |  |  |   |  |                             |  |                                    |  |
| d.  |  |  |  |                                     |  |  |  |   |  |                             |  |                                    |  |
| J. Additional Descriptions for Materials Listed Above<br>New product - Rejected - Non Hazardous   |  |  |  |                                     |  | K. Handling Codes for Wastes Listed Above<br>d99 |  |   |  |                             |  |                                    |  |
| 15. Special Handling Instructions and Additional Information<br>Gloves-Goggles  |  |  |  |                                     |  |  |  |   |  |                             |  |                                    |  |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations. |  |  |  |                                     |  |  |  |   |  |                             |  |                                    |  |
| Printed/Typed Name<br>Frank PIPPIN  |  |  |  |                                     |  |  |  |   |  | Signature<br>Frank Pippin   |  | Date<br>Month Day Year<br>04/22/86 |  |
| 17. Transporter 1 Acknowledgement of Receipt of Materials   |  |  |  |                                     |  |  |  |   |  | Signature<br>Isaac Woods Jr |  | Date<br>Month Day Year<br>04/22/86 |  |
| Printed/Typed Name<br>ISAAC Woods Jr  |  |  |  |                                     |  |  |  |   |  | Signature                   |  | Date<br>Month Day Year<br>04/22/86 |  |
| 18. Transporter 2 Acknowledgement or Receipt of Materials   |  |  |  |                                     |  |  |  |   |  | Signature                   |  | Date<br>Month Day Year<br>04/22/86 |  |
| Printed/Typed Name  |  |  |  |                                     |  |  |  |   |  | Signature                   |  | Date<br>Month Day Year<br>04/22/86 |  |
| 19. Discrepancy Indication Space  |  |  |  |                                     |  |  |  |   |  |                             |  |                                    |  |
| 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.  |  |  |  |                                     |  |  |  |   |  |                             |  |                                    |  |
| Printed/Typed Name<br>STEVEN SIMPSON  |  |  |  |                                     |  |  |  |   |  | Signature<br>Steve Simpson  |  | Date<br>Month Day Year<br>04/22/86 |  |

White: TSD/ SENDS THIS COPY TO DOHS WITHIN 30 DAYS

DHS 8022 A (7/84)  
(EPA 8700-22)

TO: P.O. Box 3000, Sacramento, CA 95812

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